LIFE, ACCIDENT AND HEALTH INSURERS

COMPANY NAME:		NAIC Company Code:
Contact:		Telephone:
REQUIRED FILINGS IN THE STATE OF:	CALIFORNIA	Filings Made During the Year 2017

(1) Checklis t	(2) Line #	(3) REQUIRED FILINGS	(4) NUMBER OF COPIES		(5) CA Required Filing Format	(6) DUE DATE	(7) FORM SOURC E	(8) APPLICAB LE NOTES	
			Dom		Foreign				
			CA	NAI C	CA				
		I. NAIC FINANCIAL STATEMENTS		C				1	
	1	Annual Statement (8 ½"x14")	xxx	ЕО	XXX	PDF (Signed) Original signature page(s)	3/1	NAIC	FAD201
	1.1	Printed Investment Schedule detail (Pages E01- E27)	xxx	ЕО	xxx	PDF	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	xxx	ЕО	xxx	PDF (Signed) Original Signature Page(s)	5/15, 8/15, 11/15	NAIC	FAD201
	3	Separate Accounts Annual Statement (8 ½"x14")	XXX	EO	XXX	PDF	3/1	NAIC	
		II. NAIC SUPPLEMENTS							
	11	Accident & Health Policy Experience Exhibit	XXX	EO	XXX	PDF	4/1	NAIC	
	12	Analysis of Annuity Operations by Lines of Business	XXX	EO	XXX	PDF	4/1	NAIC	
	13	Analysis of Increase in Annuity Reserves During Year	XXX	EO	xxx	PDF	4/1	NAIC	
	14	Credit Insurance Experience Exhibit	XXX	EO	XXX	PDF	4/1	NAIC	
	15	Interest Sensitive Life Insurance Products Report	XXX	EO	XXX	PDF	4/1	NAIC	
	16	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	XXX	EO	xxx	PDF	4/1	NAIC	
	17	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	XXX	EO	*****	PDF	A /1	NIAIC	
	18	Long-term Care Experience Reporting Forms	XXX	EO	XXX XXX	PDF	4/1 4/1	NAIC NAIC	
	19	Management Discussion & Analysis	XXX	EO	XXX	PDF	4/1	Company	
	20	Medicare Supplement Insurance Experience Exhibit	xxx	EO	xxx	PDF	3/1	NAIC	
	21	Medicare Part D Coverage Supplement	xxx	EO	xxx	PDF	3/1, 5/15, 8/15, 11/15	NAIC	
	22	Risk-Based Capital Report	xxx	ЕО	XXX	PDF (Signed) Original Signature Page(s)	3/1	NAIC	FAD390
	23	Schedule SIS	1	N/A	N/A	PDF	3/1	NAIC	FAD420
	24	Supplemental Compensation Exhibit	1	N/A	N/A	PDF	3/1	NAIC	FAD460
	25	Supplemental Health Care Exhibit (Parts 1, 2 and 3) Supplement	XXX	ЕО	XXX	PDF	4/1	NAIC	
	26	Supplemental Health Care Exhibit's Allocation Report Supplement	XXX	ЕО	XXX	PDF	4/1	NAIC	
	27	Supplemental Investment Risk Interrogatories	XXX	EO	XXX	PDF	4/1	NAIC	
	28 29	Supplemental Schedule O Supplemental XXX/AXXX Reinsurance Exhibit	XXX	EO EO	XXX XXX	PDF PDF	3/1 4/1	NAIC NAIC	
	30	Trusteed Surplus Statement	XXX	EO	XXX	PDF	3/1, 5/15, 8/15, 11/15	NAIC	
	31	Workers' Compensation Carve-Out Supplement	XXX	ЕО	xxx	PDF	3/1, When Applicable	NAIC	
	22	Actuarial Related Items		FO	ı	DDE	2/1		
	32	Actuarial Certification regarding use 2001 Preferred Class Table	xxx	EO	XXX	PDF	3/1	Company	
	33	Actuarial Certification Related Annuity	XXX	EO	VVV	PDF	3/1	Company	
		Nonforfeiture Ongoing Compliance for Equity Indexed Annuities			XXX				
	34	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	XXX	EO	XXX	PDF	3/1	Company	
	35	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	XXX	EO	XXX	PDF	3/1	Company	<u> </u>
	36	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	1	N/A	1	PDF	4/30	Company	FAD471 D
	37	Actuarial Opinion	xxx	ЕО	xxx	PDF (Signed) Original Signature Page(s)	3/1	Company	FAD440
	38	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	XXX	ЕО	xxx	PDF	3/1	Company	
	39	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	xxx	EO	xxx	PDF	3/1	Company	
	40	Actuarial Opinion on X-Factors	XXX	EO	xxx	PDF	3/1	Company	
	41	Actuarial Opinion required by Modified	xxx	EO	xxx	PDF	3/1	Company	
	42	Guaranteed Annuity Model Regulation Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	xxx	ЕО	xxx	PDF	3/1	Company	
	43	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	xxx	ЕО	xxx	PDF	3/1	Company	
	44	RAAIS required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5)	1	N/A	1	Original Signed Copy	3/15	Company	D

	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline	xxx	ЕО	xxx	PDF	3/1,5/15, 8/15, 11/15	Company	
	46	XXXV Reasonableness of Assumptions Certification	XXX	EO	XXX	PDF	3/1,5/15, 8/15,	Company	
		required by Actuarial Guideline XXXV					11/15	_	
	47	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	XXX	ЕО	XXX	PDF	3/1,5/15, 8/15, 11/15	Company	
	48	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	XXX	ЕО	XXX	PDF	3/1,5/15, 8/15, 11/15	Company	
	49	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	XXX	ЕО	XXX	PDF	3/1,5/15, 8/15, 11/15	Company	
	50	RBC Certification required under C-3 Phase I	XXX	EO	XXX	PDF	3/1	Company	
	51	RBC Certification required under C-3 Phase II	XXX	EO	XXX	PDF	3/1	Company	
	52	Statement on non-guaranteed elements - Exhibit	XXX	EO	XXX	PDF	3/1	Company	
	53	5 Int. #3 Statement on par/non-par policies – Exhibit 5 Int.	XXX	EO	XXX	PDF	3/1	Company	
		1&2							
		III. ELECTRONIC FILING REQUIREMENTS	S						
	61	Annual Statement Electronic Filing	XXX	EO	XXX		3/1	NAIC	
	62	March .PDF Filing	XXX	EO	XXX		3/1	NAIC	
	63 64	Risk-Based Capital Electronic Filing Risk-Based Capital .PDF Filing	XXX	EO EO	N/A N/A		3/1 3/1	NAIC NAIC	
	65	Separate Accounts Electronic Filing	XXX	EO	XXX		3/1	NAIC	
	66	Separate Accounts .PDF Filing	XXX	EO	XXX		3/1	NAIC	
	67	Supplemental Electronic Filing	XXX	EO	XXX		4/1	NAIC	
	68	Supplemental .PDF Filing	XXX	EO	XXX		4/1	NAIC	
	69	Quarterly Statement Electronic Filing	xxx	EO	XXX		5/15, 8/15,	NAIC	
	70	Quarterly .PDF Filing	XXX	EO	xxx		11/15 5/15, 8/15,	NAIC	
	71	June .PDF Filing	XXX	EO	XXX		11/15 6/1	NAIC	
	I	IV. ALIDERANGEDNIAL CONTROL DEL ATERI	DEDOD	TDC:					
	81	IV. AUDIT/INTERNAL CONTROL RELATED Accountants Letter of Qualifications	XXX	EO	xxx	PDF	6/1	Company	
	82	Audited Financial Reports	XXX	EO	XXX	PDF	6/1	Company	
	83	Audited Financial Reports Exemption Affidavit	1	N/A	XXX	PDF	When	Company	FAD120
	84	Communication of Internal Control Related	1	N/A	1	PDF	Applicable 8/1	Company	FAD222
		Matters Noted in Audit							
	85	CPA Awareness Letter	1	N/A	N/A	PDF	6/1	Company	FAD121
	86	Independent CPA (change)	1	N/A	N/A	PDF	When	Company	FAD124
	87	Management's Report of Internal Control Over	1	N/A	N/A	PDF	Applicable 8/1, When	Company	FAD223
	07	Financial Reporting	1	14/21	14/21	1 151	Applicable	Company	1740223
	88	Notification of Adverse Financial Condition	1	N/A	1	PDF	When Applicable	Company	FAD122
	89	Request for Extension/Exemption	1	N/A	N/A	PDF	When Applicable	Company	FAD125
	90	Request to File Consolidated Audited Annual Statements	1	N/A	N/A	PDF	When Applicable	Company	FAD126
	91	Relief from the five-year rotation requirement for lead audit partner	xxx	EO	xxx	PDF	3/1, When Applicable	Company	
	92	Relief from the one-year cooling off period for independent CPA	XXX	EO	xxx	PDF	3/1, When Applicable	Company	
	93	Relief from the Requirements for Audit Committees	XXX	EO	xxx	PDF	3/1, When Applicable	Company	
	I	1	I.	· ·	I.	1	11	1	
		V. STATE REQUIRED FILINGS	1 .	1	1 .			T T	
	101	A & H Insurers/Reinsurers with Workers Compensation Exposures	1	N/A	1	PDF (Signed) Original	3/1	CA	FAD151 G, J
	102	Actuarial Guideline 43	1	N/A	1	Signature Page(s) FAD28	3/15, When	Company	FAD28
	102	Actuariai Guideinie 43	1	IN/A	1	DOC & XLS	Applicable	Company	or
						or FAD29			FAD29 D, E
						PDF & XLS			
	103	Actuarial Memorandum	1	N/A	1	FAD24	3/15, When	Company	FAD24
						DOC & XLS or FAD25	Applicable		or FAD25
						PDF & XLS			D, E
	104	Actuarial Statement of Reserve and Pricing Adequacy for Certain Separate Account	1	N/A	1	PDF	3/1, When Applicable	Company	FAD27 D
<u> </u>	40	Guarantees for General Account					0.4 ***	G :	
	105	California specific Annual Statement, if required due to CCR Sections 2582-2582.3 (Recognition of Preferred Mortality Tables for Use in	1	N/A	1	PDF	3/1, When Applicable	CA Blue Book	FAD 35 P
	106	Determining Minimum Reserve Liabilities) Authorization for Disclosure of Financial	1	N/A	1	PDF (Signed)	3/1	CA	FAD107
		Records				Original Signature Page(s)			
	107	CA Affidavit – Declaration to Valuation of Property & Securities/Verification	1	N/A	1	PDF (Signed) Original	3/1	CA	FAD105
	108	CA Trusteed Surplus Statement	1	N/A	1	Signature Page(s) PDF	3/1, 5/15, 8/15,	CA	FAD490
		•					11/15		В
	109	Certificate of Compliance	0	N/A	1	PDF	3/1	State of Domicile	FAD101 A
	110	Certificate of Deposit	0	N/A	1	PDF	3/1	Company	FAD102 B
	111	Certificate of Valuation	0	N/A	1	PDF	6/30	Company	FAD104
	112	Disclosure of Iran-Related Investments	1	N/A	N/A	PDF & XLS	6/30	CA	FAD470
									L
			_	2	-				_

113	Disclosure of Material Transactions	1	N/A	N/A	See Note	See Note	See Note	K
114	Ending Surplus (Book Value & Market Value) for All Stochastic Scenarios	1	N/A	1	XLS	3/15, When Applicable	Company	FAD30 D, E
115	Form B (Holding Company Registration Statement)	1	N/A	1	PDF (Signed) Original Signature Page(s)	4/30	NAIC	FAD500 H
116	Form C (Summary of Registration Statement)	1	N/A	1	PDF (Signed) Original Signature Page(s)	4/30	NAIC	FAD501 H
117	Form F (Enterprise Risk Report)	1	N/A	See Note	PDF	4/30,When Applicable	NAIC	FAD502 M
118	Insurer Climate Risk Disclosure Survey	1	N/A	1	See Note	See Note	See Note	I
119	Premium Tax Return/Payment	1	N/A	1	See Note	See Note	See Note	C
120	Reinsurance Disclosure Report	1	N/A	N/A	See Note	See Note	See Note	N
121	Special California Schedule P	1	N/A	1	PDF (Signed) & XLS Original Signature Page(s)	3/1	CA	FAD152 G
122	Valuation of Securities (A110)	1	N/A	1	PDF (Signed) & XLS Original Signature Page(s)	3/1, 5/15 & As Required	CA	FAD110 F
123	Corporate Governance Annual Disclosure (CGAD)	1	N/A	N/A	PDF (Signed) Original Signature Page(s)	6/1	Company	FAD503 O
124	Own Risk and Solvency Assessment (ORSA)	1	N/A	N/A	PDF (Signed) Original Signature Page(s)	QTR-4	Company	FAD504 O

GENERAL INSTRUCTIONS

Submission

Pursuant to California Code of Regulation ("CCR") 2308.1, the Insurance Commissioner ("Commissioner") designates the Internet-based financial filing system operated by the National Association of Insurance Commissioners ("NAIC") as the filing system to receive and store electronic filings of annual and quarterly financial statements from all admitted insurers.

When filed, solely for purposes of a filing made with the NAIC, a document is considered filed with the Commissioner when the filing is accepted by the NAIC. Any financial statements, which are not required to be filed with the NAIC or required to be filed with the NAIC that is not accepted for filing by the NAIC, shall be filed directly with the California Department of Insurance ("CDI") via the Online Assistance System for Insurer Submittals ("OASIS").

For documents requiring original signature(s)/certification/notarization, the electronic PDF file must contain the required signature(s)/certification/notarization. In addition, a paper original of a properly executed Jurat page from the related financial statement filed electronically shall be provided to the Commissioner as confirmation of each electronic filing. For admitted foreign and alien insurers, a paper original of such properly executed Jurat page is not needed, if it is already on file with its domestic regulator.

All original signature pages must be mailed to:

California Department of Insurance Financial Analysis Division, Financial Records Unit 300 South Spring Street, South Tower, 13th Floor Los Angeles, CA 90013

Original Signatures and Signature/Notarization/Certification

Refer to California Insurance Code Section ("CICS") 903 and CICS 903.5 for guidance. For signature(s), please use BLUE INK.

Note: As of January 1, 2008, all documents notarized in the state of California must comply with Section 8202 of the Government Code and Section 1185 of the Civil Code in reference to establishing an affiant's identity.

Contact Information

For questions regarding filings, please contact Financial Records Unit at (213)346-6423 / Financial Records@insurance.ca.gov or visit the CDI's website at: http://www.insurance.ca.gov.

Late Filings

Electronic filings must be submitted before 12:00 midnight of the due date. Paper filings must be postmarked on or before the due date. Any company that fails to make a timely and complete filing may be subject to a late filing fee. A late filing fee will be assessed for the first month and every month or fractional part thereof until the required filing is submitted. The Company is required to pay the late filing fee through OASIS.

Amended Filings

Amended items must be filed timely along with an explanation of the amendments. If there are signature requirements for the original filing, same should be followed for any subsequent amendment. Please contact Financial Records Unit at (213) 346-6423 or Financial Records@insurance.ca.gov prior to submitting any amendment via OASIS.

Request for Extension/Exemption

Not all documents can be given an extension of time to file or to be exempted from filing. Please refer to California Insurance Code ("CIC") and California Code of Regulations ("CCR") for guidance. Pursuant to CICS 924, applicable late filing fees will be assessed even with a granted extension. Unless otherwise specified in the CIC or CCR, the request for extension/exemption must be received by the Department:

- For a domestic insurer, at least 30 days prior to the filing due date.
- For a foreign insurer, at least 10 days prior to the filing due date. The request must be accompanied by a copy of the domiciliary state insurance regulator's approval letter.

For requests relating to Section IV - AUDIT/INTERNAL CONTROL RELATED REPORTS, please submit them via OASIS. For other requests, please e-mail them to Financial Records Unit at Financial Records@insurance.ca.gov directly.

NONE or N/A Filings

- For NAIC Submissions, see Official NAIC Annual Statement Blank for Supplemental Exhibits and Schedules Interrogatories.
- For CA Supplemental Submissions, when there is nothing to report or the form is not applicable, the word "NONE" or "N/A" must appear stamped/written on the required form. Company information must be filled in (e.g., Company name and NAIC #).

Column (1) Checklist

Companies may use the checklist to submit to a state. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) Line

Line # refers to a standard filing number used for reference only. This line number may change from year to year.

Column (3) Required Filings

Name of form or document to be filed.

Under Section III. ELECTRONIC FILING REQUIREMENTS:

The Annual Statement Electronic Filing includes the annual statement data and all supplements due March 1, per the Annual Statement Instructions. This includes all detail investment schedules and other supplements for which the Annual Statement Instructions exempt printed detail.

The March .PDF Filing is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The Risk-Based Capital Electronic Filing includes all risk-based capital data.

The Risk-Based Capital .PDF Filing is the .pdf file for risk-based capital data.

The Separate Accounts Electronic Filing includes the separate accounts annual statement and investment schedule detail.

The Separate Accounts .PDF Filing is the .pdf file for the separate accounts annual statement and all investment schedule detail.

The Supplemental Electronic Filing includes all supplements due April 1, per the Annual Statement Instructions.

The Supplement .PDF Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The Quarterly Electronic Filing includes the quarterly statement data.

The Quarterly .PDF Filing is the .pdf for quarterly statement data.

The June .PDF Filing is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) Number of Copies

- XXX = If a hardcopy (or a paper original of a properly executed Jurat page from the related financial statement filed
 electronically) is filed with the state of domicile and the data is filed electronically with the NAIC, California does not
 require a separate filing of this financial statement.
- N/A = Filing is required with the domiciliary state only.
- 0 = California domestic companies are not required to file.
- EO = Electronic only filing. Electronic filing is intended to include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (5) California Required Electronic Filing Format

Adobe PDF (PDF)

For document requiring original signature(s)/certification/notarization, the PDF file must contain the required signature(s)/certification/notarization.

MS Excel (XLS)

For document requiring an Excel version, the related form is provided on our Website. The Excel version does not require signature(s)/certification/notarization.

Note: For Special California Schedule P (SCASP) & Valuation of Securities (A-110) filings, please follow the naming standards on the SCASP & A-110 instruction page.

Column (6) Due Date

Indicates the date on which the company must file the form.

Column (7) Form Source

- NAIC = Company must obtain the forms from the appropriate vendor.
- CA = CDI will prescribe the forms with the filing instructions.
- Company = Company, or its representative is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instruction*.
- State of Domicile = Document issued by the domiciliary state insurance regulator.

Column (8) Applicable Notes

This column contains references to the Notes that apply to each item listed on the checklist. It also contains the CDI form numbers (in red) for reference only. The company should carefully read these notes <u>before</u> submitting a filing.

NOTES

A	Certificate of Compliance	Foreign insurer must file with the CDI a Certificate of Compliance issued by its state of domicile or port of entry insurance regulator.
		California domestic insurers that are required to file a Certificate of Compliance with other states should contact the Corporate and Regulatory Affairs Branch to obtain a copy.
		California Department of Insurance Corporate and Regulatory Affairs Branch
		Re: Certificate of Compliance 45 Fremont Street, 24 th Floor
		San Francisco, CA 94105
В	California Trusteed Surplus Statement/Certificate of	(415) 538-4154 Applies to alien insurer only. Refer to CICS 1591 for guidance.
С	Deposit Premium Tax Return/Payment	Tax forms, instructions & information are available on the CDI website:
		http://www.insurance.ca.gov. Under Insurers, click on Applications, Forms & Filings and go to: Tax Forms, Instructions & Information.
		For questions concerning the completion of the tax return, please contact the Premium Tax Audit Bureau at (213) 346-6097.
		For premium tax payment, please mail it to:
		Mailing Address Overnight Mail California Department California Department
		of Insurance of Insurance Tax Accounting/EFT Unit Tax Accounting/EFT Unit
		P.O. BOX 1918 300 Capitol Mall, Suite 1400 Sacramento, CA 95812-1918 Sacramento, CA 95814
D	Contact Information for Actuarial Office	Questions and Mailing Address Senior Life Actuary
		California Department of Insurance
		300 South Spring Street, South Tower, 14th Floor Los Angeles, CA 90013
		E-mail: Ahmad.Kamil@insurance.ca.gov Phone: (213) 346-6147
		Note: All licensed companies are required to submit the RAAIS. Please mail
		the 2016 RAAIS in paper format to the address above. Actuarial Memoranda will be viewed as confidential, and will be destroyed after review is completed.
E	Actuarial Memorandum	Refer to instructions in the 2016 Actuarial Memorandum and Executive Summary.
F	Valuation of Securities (A110)	For insurers licensed to transact workers' compensation insurance in California or authorized to reinsure the injury, disablement, or death portions of workers' compensation policies.
		 A110 as of December 31, 2016 is due on March 1, 2017. A110 as of March 31, 2017 is due on May 15, 2017.
		 <u>NEW</u>: An updated A110 with the most current valuations must be submitted in hardcopy together with the workers' compensation deposit withdrawal request in order for the request to be processed.
G	Special California Schedule P (SCASP)	For insurers licensed to transact workers' compensation insurance in California or authorized to reinsure the injury, disablement, or death
		portions of workers' compensation policies. SCASP filings must be submitted via OASIS. Please follow the naming standards on the SCASP instruction page.
Н	Forms B and C (Holding Company Registration Statement and Summary)	Due date of filing: March, 1, 2017 Apply to California domestic and commercially domiciled insurers only.
I	Insurer Climate Risk Disclosure Survey	Check the CDI website: CLIMATE RISK DISCLOSURE SURVEY for the latest information. For questions please email ClimateRiskSurvey@insurance.ca.gov or call Randi Wood at (916) 492-3501.
J	A & H Insurers/Reinsurers with Workers Compensation Exposures (FAD 151)	 For insurers or reinsurers authorized to reinsure the injury, disablement, or death portions of workers' compensation policies. Refer to our Website for the list of companies required to file Form 151 annually:
		http://www.insurance.ca.gov/0400-news/0200-studies-reports/1300-workers-compensation/index.cfm.
		Signed FAD 151 filings in PDF format must be submitted via OASIS. <i>Due date of filing: March 1, 2017</i>
**	D. I. CM . LITT	For companies that wish to be on the list, please submit filings in signed PDF format to FADWC@insurance.ca.gov. Pofor to http://www.insurance.ca.gov.
K	Disclosure of Material Transactions	Refer to http://www.insurance.ca.gov/0250-insurers/0300-insurers/0100-applications/financial-filing-notices-forms/annualnotices/disclosure.cfm for guidance. When applicable, the report shall be filed within 15 days after the end of the calendar month in which the transactions occur. 15 days after the end of the calendar month in which the transactions occur.
L	Disclosure of Iran-Related Investments	For your convenience, the <u>Disclosure of Iran-Related Investments form</u> and the <u>Department of General Services List</u> are being made available on our
M	Form F (Enterprise Risk Report)	Website. Refer to CICS 1215.4 (m) for guidance. A California commercially domiciled
I	-	company is required to file Form F only when the lead state does not require it.

N	Reinsurance Disclosure Report	Refer to <u>Disclosure of Reinsurance Recoverable and Reinsurance Program Diversification</u> for guidance. When applicable, the report shall be filed within 30 days after the event occurs.
О	ORSA and CGAD	 ORSA - Refer to <u>CICS 935.1 – 935.11</u> for guidance. CGAD - Refer to <u>CICS 936.1 – 936.9</u> for guidance. The filing must be submitted in <u>encrypted .PDF</u> format. For submission, please call (213) 346-6423.
P	California specific Annual Statement, if required due to CCR Sections 2582-2582.3 (Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities)	Refer to CCR Sections 2582-2582 (Article 17.3 - Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities) for guidance.